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FEC FORM 1

Office

Use

Only

STATEMENT OF ORGANIZATION

RECEIVED

2014 JUN 30 AM 8: 14

FEC FORM 1

(Revised 06/2012)

			Office Use Only		
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5 FEC MAIL CENTER		
CINIRITIZIS MICILI	AUGHLIN FOR	RI 16101N161P1E15151			
ADDRESS (number and street)	[2,0,5, yo,r, k,s,1	hiire Dr			
(Check if address is changed)		1111111			
	CITY A	6			
COMMITTEE'S E-MAIL ADDRESS					
(Check if address is changed)	[[u,r,t,1,5,n,c,40	~, w, g, h, l, i, n, 2,0, 1,	4@16,70,1,1,16,0,7		
	Optional Second E-Mail Addr		(@9,74:11.60,7		
COMMITTEE'S WEB PAGE ADDRESS (URL)					
(Check if address is changed)	•	(. 0. m. /. 1. n. a t. i.s.	f10166010101916815151111		
is changed)			MOLE CONTRACTOR		
2. DATE \$\int_{0}^{\text{N}} \bigcup_{0}^{\text{V}} \cdot \int_{0}^{\text{V}}	9 2014				
3. FEC IDENTIFICATION NUMBER ▶ COO563767					
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)			
I certify that I have examined the	nis Statement and to the best o	f my knowledge and belief it i	s true, correct and complete.		
Type or Print Name of Treasure	r				
Signature of Treasurer	W Sn		Date 06 19 2014		
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.					

For further information contact:

Federal Election Commission

Toll Free 800-424-9530

Local 202-694-1100

- 1 110	7 age 2	
	COMMITTEE	
Cenala	te Committee:	
(a) ·	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candida information below.)	te
Name of Candidate	[Cinititis Fingle Michalugh (1) m Junio, 7	لــــــــــــــــــــــــــــــــــــــ
Candidate Party Affil	1 _ A Ollido	5 C 0 Y
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party C	mmittee:	
(d)	(National, State (Democratic, This committee is a or subordinate) committee of the Republican, etc.)	Party.
Political	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization	on is a:
	Corporation Corporation w/o Capital Stock Labor Organiza	tion
	Membership Organization Trade Association Cooperative	
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or committee. (i.e., nonconnected committee)	party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fu	idraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more politica committees/organizations, at least one of which is an authorized committee of a federal candidate.	i
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.	I
Co	mmittees Participating in Joint Fundraiser	
	[
1.		
2.	FEC ID number C	
3.	FEC ID number C	
4.	FEC ID number C	

FEC Form 1 (Revis	ad 02/2009)	Dago 2
Write or Type Committee N		Page 3
6. Name of Any Connecto	d Organization, Affiliated Committee, Joint Fundraising Representativ	e, or Leadership PAC Sponsor
MONTILLI	<u> </u>	1 1 1 1 1 1 1 1 1 1
Mailing Address		
		سيا-ليسا
	CITY STATE	ZIP CODE
Relationship: Conne	cted Organization Affiliated Committee Joint Fundraising Represer	ntative Leadership PAC Sponso
 Custodian of Records: books and records. 	Identify by name, address (phone number optional) and position of the	person in possession of committee
Full Name MA	TITIHIEIW SUITITION	
Mailing Address	19 WINDEMERE DRIVE	
	GREENVILLE	[2,9,6,1,5]-
Title or Position	CITY STATE	ZIP CODE
SIR	Telephone number	81614-13113-1814186
3. Treasurer: List the name any designated agent (e.	and address (phone number optional) of the treasurer of the committe g., assistant treasurer).	e; and the name and address of
Full Name of Treasurer	TITHEN SUITIAM	
Mailing Address	19, WIMDAMERE DREVE	
	GREENVELLE 54	[2,9,6,1,5]-
Title or Position	CITY STATE	ZIP CODE
16-0	Telephone number	26.41-131.31-184.86

CITY

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Name of Bank, Depository, etc.

FEC Form 1 (Revised 02/2009)

Mailing Address

LILLING Address

LILLIN

STATE

ZIP CODE

403125138

FEC MAIL CENTER

23 ALM 2014 FW41 CKETHAILE ST 256

Curtis McLaughlin Br. 205 Yorkshire Dr.

Greenville 15c, 24615

20463

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Federal Election Counission 999 E Street, N.W., Washigton OC 20463

(8/2013)

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how if was received. Date of Receipt **Hand Delivered** Postmarked USPS First Class Mail 6/23/14 Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail** Postmarked **USPS Priority Mail Express** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): Next Business Day Delivery **Date of Receipt** Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): DATE PREPARED